

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

*Walt Monegan, Comm.
5700 E. Tudac Road
Anchorage, Alaska
99507*

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Walt Monegan* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Walt Monegan* C. Date of Delivery *9-10-07*

D. Is delivery address different from that on the front of the mailpiece? ☐ Yes ☒ No

RESTRICTED DELIVERY

3. Service Type

- ☐ Certified Mail ☐ Express Mail
☒ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☒ Yes

2. Article Number

RA393 459 59 945
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

102595-02-M-1540

Domestic Return Receipt

PS Form 3811, February 2004

2. Article Number

RA393 459 59 945
(Transfer from service label)

4. Restricted Delivery? (Extra Fee) ☒ Yes

3. Service Type
- ☐ Certified Mail ☐ Express Mail
☒ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

D. Is delivery address different from that on the front of the mailpiece? ☐ Yes ☒ No

1. Article Addressed to:

*Walt Monegan, Comm.
5700 E. Tudac Road
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Attachment 1